

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Receipt #5 SC 12-7-99

Attorney Docket No.: VLSI-3410

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Date of Deposit:	10/08/99	Name of Person Making the Deposit:	DESIREE ORTIZ	Signature of the Person Making the Deposit: <i>Desiree Ortiz</i>

Inventor(s): John Terrence Reagan; Anna Znamerovskaya

Serial No.: 09/322,259

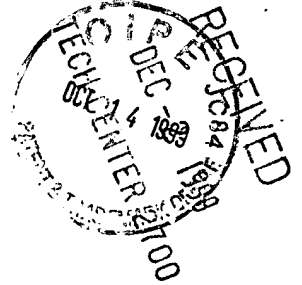
Group Art Unit: 2741

Filed: 05/28/98

Examiner:

Title: IMPROVED VOCODER METHOD

Assistant Commissioner for Patents
Washington, D.C. 20231



REQUEST FOR CORRECTED FILING RECEIPT

- Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.
- There is an error with respect to the following data, which is:

☒ incorrectly entered

and/or

☐ omitted.

Error In

Correct Data

- ☒ Applicant's name
- ☐ Applicant's address
- ☒ Title
- ☐ Filing Data
- ☐ Serial Number
- ☐ Foreign/PCT Application Re:
- ☐ Other

- John Terrence Reagan, Santa Clara, CA; Anna Znamerovskaya, San Jose, CA.
-
- IMPROVED VOCODER METHOD
-
-
-
-

3.

A. ☒ The correction(s) is/are not due to any error by the applicant and no fee is due.

OR

B. ☐ At least one of the above corrections is due to applicant's error and the fee therefor, under CFR 1.19(h), of \$25.00 is paid as follows:

☐ Enclosed is check for \$25.00.

☐ Charge Account _____ \$25.00.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP

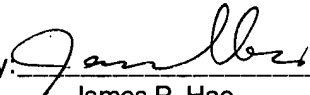
Two North Market Street, Third Floor

San Jose, California 95113

(408) 938-9060

Respectfully submitted,

Date: October 8, 1999

By: 
James P. Hao
Reg. No. 36,398

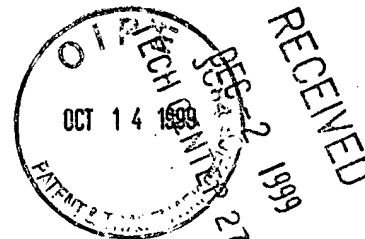
FILING RECEIPT
CORRECTED



UNITED STATES DEPARTMENT OF COMMERCE
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/322,259	05/28/98	2741	\$968.00	VLSI-3410	3	16	4

WAGNER MURABITO & HATO LLP
TWO NORTH MARKET STREET
THIRD FLOOR
SAN JOSE CA 95113



Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) JOHN TERRANCE REGAN, SANTA CLARA, CA; ANNA
ZNAMEROVSKAYA, SANTA JOSE, CA.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 06/22/99
TITLE
VOCODER METHOD

PRELIMINARY CLASS: 704

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TEAM: 03 DATE: 09/07/99

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(See reverse for new important information)

SERIAL NUMBER 09/322,259	FILING DATE 05/28/98	CLASS 704	GROUP ART UNIT 2741	ATTORNEY DOCKET NO. VLSI-3410
APPLICANT	JOHN TERRANCE REAGAN, SANTA CLARA, CA; ANNA ZNAMEROVSKAYA, SAN JOSE, CA.			
	CONTINUING DOMESTIC DATA*** VERIFIED _____			
	371 (NAT'L STAGE) DATA*** VERIFIED _____			
	FOREIGN APPLICATIONS*** VERIFIED _____			
IF REQUIRED, FOREIGN FILING LICENSE GRANTED 06/22/99				
Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no Verified and Acknowledged <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 16
Examiner's Initials _____		INDEPENDENT CLAIMS 4		
ADDRESS	WAGNER MURABITO & HATO LLP TWO NORTH MARKET STREET THIRD FLOOR SAN JOSE CA 95113			
	VOCODER METHOD			
TITLE				
FILING FEE RECEIVED \$968	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	